

APPLICATION FOR TITLE OR REGISTRATION

DMV USE ONLY			
O/S DL #/STATE			
TECH INITIALS			

1. OWNER INFORMATION (Please pr	int true full name or les	ssor/business name)			
LAST NAME OR LESSOR OR BUSINESS NAME	FIRST NAME	MIDDLE NAME	CALIFORNIA	DRIVER LICENSE OR ID NUMBER	
LAST NAME, OR LESSEE	FIRST NAME	MIDDLE NAME	CALIFORNIA	DRIVER LICENSE OR ID NUMBER	
LAST NAME, OR LESSEE	FIRST NAME	MIDDLE NAME	CALIFORNIA	DRIVER LICENSE OR ID NUMBER	
□ AND □ OR	FIRST IVAIVIE	WIDDLE NAME	CALIFORNIA	DRIVER LICENSE OR ID NOWIBER	
RESIDENCE OR BUSINESS ADDRESS (Include St., Ave., etc.)	APT./SPACE NO.	CITY	STATE	ZIP CODE	
MAILING ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE	
LESSEE ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE	
ADDRESS WHERE TRAILER IS LOCATED (If Different From Abo	ve)	CITY	STATE	ZIP CODE	
2. TITLE HOLDER INFORMATION (D	o NOT reenter owners r	name) If none, go to Pa	rt 3		
NAME OF BANK/FINANCE COMPANY OR INDIVIDUAL			ELECTRONIC	ELECTRONIC TITLE NUMBER	
BUSINESS OR RESIDENCE ADDRESS	APT./SPACE NO.	CITY	STATE	ZIP CODE	
MAILING ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE	
3. COST AND OPERATION INFORMAT					
MILES/KILOMETERS AT TIME OF ENTRY	s) Miles Kilo.	E PRICE OR MARKET VALUE (IF GIFT,	OR TRADE) DATE YOU P	URCHASED OR ACQUIRED VEHICLE Day Yr	
DATE VEHICLE ENTERED CALIFORNIA	D	ATE YOU WENT TO WORK IN CALIFOR		NT	
Mo Day Yr		Mo Day	Yr	(whichever occurred first)	
A. Will this vehicle be used to carry pe	ople for hire (taxi, bus, et	c.)?		□Yes □No	
B. Are you now or have you within the	last three years been on	active duty with the U.S.	. Armed Forces?	Yes No	
C. When you acquired this vehicle wer	e you on active duty in th	ne U.S. Armed Forces?		Yes No	
If yes, print name of state or country	/ where stationed				
4. OWNER(S) SIGNATURE(S)					
The registered owner mailing address is this mailing address pursuant to §1805.			. I consent to recei	ve service of process at	
I certify under penalty of perjury und	er the laws of the State	of California that the fo	oregoing is true a	and correct.	
OWNER'S SIGNATURE		DATE	DAYTIME TE	LEPHONE NUMBER	
X			())	
OWNER'S SIGNATURE X		DATE	DAYTIME TE	LEPHONE NUMBER	
		1			



VERIFICATION OF VEHICLE NOT TO BE COMPLETED BY APPLICANT

This form must be completed in full by an authorized DMV representative, California licensed vehicle verifier, authorized auto club, or peace officer.

WARNING: Alterations or erasures will void this form	n.		
LICENSE PLATES ON VEHICLE	LICENSE PLATE NUMBER	STATE	EXP. DATE
☐ None ☐ Dealer ☐ Temporary Permit			
VEHICLE IDENTIFICATION NUMBER (VIN)			l .
			1 1 1 1
ENGINE NUMBER (MOTORCYCLES ONLY)	MAKE	BODY TYPE	MODEL YEAR
AXLES MOTIVE POWER (FUEL) EST. WEIGHT (TRAILE	RS) MODEL OR SERIES	FOR CMP/CCH	
	,	Length	Width
VIN Location:	Attached by:		
☐ Visible through windshield ☐ Trunk	□ Not visible	☐ Adhesive	
☐ Body—Left (driver side) ☐ Frame	☐ Rosette rivets	☐ Not applica	hla
☐ Body—Right ☐ Other:	☐ Round rivets	Other:	
☐ Engine compartment	Screws	□ Other	
Type:	Stamped on Frame		
☐ Metal plate	☐ Label		
☐ Stamped on body	☐ Other:		
VIN/ENGINE NUMBER (IF MOTORCYCLE, MARK BOTH VIN AND ENG. BOXES) VIN ENG VIN ENG	VIN ENG	VIN ENG	
VIN ENG VIN ENG □ □ Appears okay □ □ Illegible/Damage		□ □ Assigne	od by E/O
☐ ☐ Appears okay ☐ ☐ Inlegible/Darriage	□ □ Carriot locate □ □ None—Newly built		MARKS
FEDERAL CERTIFICATION LABEL (1970 AND SUBSEQUENT YEAR MODELS):	□ □ None—Newly built		IVIARNO
<u> </u>			
	egible/Damaged	☐ None—NA	D1/0
☐ Disagrees with VIN ☐ M	issing	☐ See REMA	RKS
ODOMETER MILEAGE READING			
record mileage exactly as shown on vehicle odometer		∕ ₁₀ (no tenths) ∟	miles \square kilometers
SUPPORTING DOCUMENTS:		<u>'</u>	
	o VIN on documents	☐ See REMA	RKS
☐ Disagrees with VIN ☐ N	one		
EMISSION LABEL INDICATES:			
☐ Vehicle meets US EPA standards only	☐ Vehicle meets Californi	a standards only	
☐ Vehicle meets US EPA standards and California standa		,	
REMARKS			
☐ DO NOT PROCESS - REFER TO CHP			
I certify under penalty of perjury under the laws of the S	State of California that I examined	I the vehicle descri	bed above and I find
the description of the vehicle to be as indicated.			
VERIFIER (PRINT NAME)		TITLE/BADGE/ID NUMBER	
ADDRESS	CITY		STATE
VERIFIED AT	CITY		STATE
☐ Above address ☐ Other (specify)			
VERIFIER'S SIGNATURE		DATE	
X			
VERIFYING AGENCY			
	ace Officer (specify):		
_	TEMENT OF FACTS		
IDENTIFICATION NU	MBER OR ENGINE NUMBER ER	ROR	
I certify under penalty of perjury that I am the owner of	above described vehicle and had	d no knowledge of	the difference in the
identification or engine number on the vehicle and titlir		-	
VEHICLE OWNER'S SIGNATURE		DATE	
	I		